

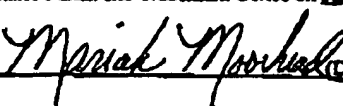
JAN. 31. 2005 4:40PM

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JAN 31 2005

PATENT
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Certificate of Mailing Under 37 CFR §1.8	
I hereby certify that this paper is being transmitted via facsimile to Examiner Jason T. Whipkey at 703-572-9306 at the United States Patent and Trademark Office on January 31, 2005.	
	Mariah Moorhead (Depositor's Name)

Applicants:	Wulf, et al.	Group Art Unit:	2612
Serial No.:	09/609,057	Examiner:	Whipkey, Jason T.
Filed:	June 30, 2000		
Title:	Integrated Enclosure for Video Surveillance Camera		

PETITION AND FEE FOR EXTENSION OF TIME

Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is a petition for a three-month extension of time for responding to the Office Action mailed July 30, 2004, extending the due date for response from October 30, 2004 to January 31, 2005.

Payment of the required extension fees is included on the attached Fee Transmittal.

Respectfully submitted,



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(561) 981-4366 (phone)
(561) 988-7843 (facsimile)

05/26/2005 BALEXAND 00000003 191346 09609057

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Attorney Docket No.: C4-903A

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

09609057

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	24 minus 20 =	4
INDEPENDENT CLAIMS	2 minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	31 Minus	24	= 6
Independent	3 Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	Minus		=
Independent	Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	Minus		=
Independent	Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE	OR	RATE	FEE
	345.00			690.00
X\$ 9=		OR	X\$18=	12
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	162

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	300.00
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	